MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT											
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1						51							101		
2							52							102		
3							53							103		
4							54							104		
5							55							105		
6		3					56							106		
7		3					57							107		
8		3					58							108		
9		1					59							109		
10							60							110		
11							61							111		
12							62							112		
13							63							113		
14							64							114		
15							65							115		
16							66							116		
17	1						67							117		
18							68							118		
19							69							119		
20							70							120		
21							71							121		
22							72							122		
23							73							123		
24							74							124		
25							75							125		
26							76							126		
27							77							127		
28							78							128		
29							79							129		
30							80							130		
31							81							131		
32							82							132		
33							83							133		
34							84							134		
35							85							135		
36							86							136		
37							87							137		
38							88							138		
39							89							139		
40							90							140		
41							91							141		
42							92							142		
43							93							143		
44							94							144		
45							95							145		
46							96							146		
47							97							147		
48							98							148		
49							99							149		
50							100							150		
TOTAL IND.	2						TOTAL IND.							TOTAL IND.		
TOTAL DEP.	21						TOTAL DEP.							TOTAL DEP.		
TOTAL CLAIMS	23						TOTAL CLAIMS							TOTAL CLAIMS		

17
1
21

PTO-1360 (Replication only) (3/03)